Docket No.

243895US0DIV

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S) Syozo KOBAYASHI, et al.

SERIAL NO: New Application

FILING DATE: Herewith

FOR:

NOVEL SULFONYL DERIVATIVES

FEE TRANSMITTAL

COMMISSIONER FOR PATENTS
ALEXANDRIA, VIRGINIA 22313

| FOR | NUMBER FILED | | NUMBER EXTRA | RATE | | | CALCULATIONS |
|---|-----------------|------|-----------------|------|-------|----|--------------|
| TOTAL CLAIMS | 27 - : | 20 = | 7 | х | \$18 | = | \$126.00 |
| INDEPENDENT CLAIMS | 1 - | 3 = | 0 | x | \$86 | = | \$0.00 |
| MULTIPLE DEPENDENT CLAIMS (If applicable) | | | | | | = | \$290.00 |
| ☐ LATE FILING OF DECLARATION | | | | | \$130 | = | \$0.00 |
| | \$770.00 | | | | | | |
| | \$1,186.00 | | | | | | |
| □ REDUCTION BY 50% FOR FILING BY SMALL ENTITY | | | | | | | \$0.00 |
| ☐ FILING IN NON-ENGLISH LANGUAGE | | | | | \$130 | = | \$0.00 |
| RECORDATION OF ASSIGNMENT | | | | + | \$40 | = | \$0.00 |
| | | | | | TOT | AL | \$1,186.00 |

| | Please charge Deposit Account No. | 15-0030 in the amount of \$0.00 A d | uplicate copy of this sheet is enclosed. |
|--|-----------------------------------|-------------------------------------|--|
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A check in the amount of \$1,186.00 to cover the filing fee is enclosed.

☐ Credit card payment form is attached to cover the filing fee in the amount of \$0.00

The Director is hereby authorized to charge any additional fees which may be required for the papers being filed herewith and for which no check or credit card payment is enclosed herewith, or credit any overpayment to Deposit Account No. 15-0030. A duplicate copy of this sheet is enclosed.

Respectfully Submitted,

OBLON, SPIVAK, McCLELLAND,

MAIER & NEWSTADT, P.C.

te: 10-8-03

F. Oblon

Registration No.

24,618

Customer Number

22850

Tel. (703) 413-3000 Fax. (703) 413-2220 (OSMMN 05/03) Thomas W. Barnes III, Ph.D. Registration No. 52,595